By Express Mail #EL 834972466 US Attorney Docket No.: 3245-811

Dated: June 20, 2001

Check box if applicable: \(\bigsigma\) DUPLICATE

UTILITY PATENT APPLICATION TRANSMITTAL

Submit an original and a duplicate for fee processing (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Assistant Commissioner for Patents BOX PATENT APPLICATION Washington, DC 20231

Sir:

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n.

Transmitted herewith for filing is the utility patent application of:

Inventor(s): Stephan KLEIER, Frank TIMPHUS, Christian WIETFELD, Christian HERZOG

For: WAP-Group-Call

Enclosed are:

- Transmittal letter (2x) with Fee Computation Sheet
- General Authorization For Payment of Fees (2x)
- Title Page, Specification, Claims 1 to 27 & Abstract (19 pages)
- Unexecuted Declaration and Power of Attorney (4 p.)
- Five sheet(s) of drawing(s) (Figs. 1 to 10)
- Check for \$836 for filing fee
- Return Receipt Postcard
- П Please charge my Deposit Account No. 03-2412 in the amount of \$. A duplicate copy of this sheet is enclosed.
- The Commissioner is hereby authorized to charge payment of the following fees associated [X]with this application or credit any overpayment to Deposit Acct. No. 03-2412.
 - [X]Any additional filing fees required under 37 CFR 1.16.
 - Any patent application processing fees under 37 CFR 1.17 [x]
 - The issue fee set in 37 CFR 1.18 at 3 months from mailing of the [x]Notice of Allowance, pursuant to 37 CFR 1.311 (b) provided the fee has not already been paid by check.

- [x] Any filing fees under 37 CFR 1.16 for presentation of extra claims.
- [x] Priority is claimed for this invention and application, corresponding applications having been filed in **Germany** on **June 20, 2000**, No. **100 30 189.4**.

Respectfully submitted, COHEN, PONTANI, LIEBERMAN & PAVANE

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FILING FEE COMPUTATION SHEET

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In re Application of: Stephan KLEIER et al.

For: WAP-Group-Call

The filing fee has been calculated as shown below:

| FOR: | Col. 1 | Col. 2 | SMALL ENTITY | | OTHER THAN SMALL ENTITY | |
|----------------------------------------------------------------------------|------------------|----------|--------------|-------|----------------------------|--------------|
| | # FILED | # EXTRA | | | | |
| BASIC FEE | | | | \$355 | | \$710 |
| TOTAL CLAIMS | <u>27</u> - 20 = | 7 | x 9 = | \$ | x 18 = | \$126 |
| INDEPENDENT CLAIMS | <u>2</u> - 3 = | <u>0</u> | x 40 = | \$ | x 80 = | \$ |
| [] MULTIPLE DEPENDENCY | | | +\$135 = | \$ | + 270 | \$ |
| * If the difference in Col. 1 is less than zero, enter "0" in Col. 2 | | | TOTAL: | \$ | | \$836 |